

CLAIMS ONLY							Application Number <b>10773655</b>		Filing Date	
							Applicant(s)			
							* May be used for additional claims or amendments			
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1						51				
2						52				
3						53				
4						54				
5						55				
6						56				
7						57				
8						58				
9						59				
10						60				
11						61				
12						62				
13						63				
14						64				
15	I		I			65				
16		I		I		66				
17		I		I		67				
18		I		I		68				
19		I		I		69				
20		I		I		70				
21		I		I		71				
22		I		I		72				
23		I		I		73				
24		I		I		74				
25		I		I		75				
26		I		I		76				
27		I		I		77				
28		I		I		78				
29	I		I			79				
30						80				
31						81				
32						82				
33						83				
34						84				
35						85				
36						86				
37						87				
38						88				
39						89				
40						90				
41						91				
42						92				
43						93				
44						94				
45						95				
46						96				
47						97				
48						98				
49						99				
50						100				
Total Indep	2		2			Total Indep				
Total Depend	13	←	13	←	←	Total Depend	←	←	←	
Total Claims	15		15			Total Claims				